## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Ending Spending Action Fund	FEC IDENTIFICATION NUMBER ▼  C C00489856
	O contact
Check if 24-hour report X 48-hour report New report Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee American Media & Advocacy Group	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 Slaters Lane	Amount
City State Zip Code	217608.00
Alexandria VA 22314	Transaction ID : SE.5442  Date of Disbursement or Obligation
Purpose of Expenditure media placement Category/ Type	05 / 22 / 2014
Name of Federal Candidate Support Offi	ce Sought: House District:
Terri Lynn Land Oppose	President State: MI
Calendar Year-To-Date Per Election for Office Sought  Disl 217608.00	bursement For:
Full Name of Payee American Media & Advocacy Group	Date of Public Distribution/Dissemination
Mailing Address 815 Slaters Lane	06042014Amount
City State Zip Code	217608.00
Alexandria VA 22314	Transaction ID : SE.5444  Date of Disbursement or Obligation
Purpose of Expenditure media placement Category/ Type	05 22 2014
Name of Federal Candidate Support Offi	ce Sought: House District:
Gary Peters Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought  Dis 20'	bursement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	435216.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Nancy H. Watkins  [Electronically Filed] Date	06 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Oignature	